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SECRETARY OF STATE ALLAHASSEE, FLORIDA

T. BURGH JAN 3.1.2004

COVER LETTER

	gistration Section vision of Corporations	
SUBJECT:	All AMERICAN C Name of L	MRPENTRY 3 CONSTRUCTION, LLC
The enclose	d Articles of Organization and fee(s)	are submitted for filing.
Please return	n all correspondence concerning this	matter to the following:
	Steven T. 14	Name of Person
		Firm/Company
	4555 Louvini	a C+. Address
	Talla, FL. 3 toold tallahas	City/State and Zip Code See @ col. Com (to be used for future annual report notification)
For further i	information concerning this matter, pl	ease call:
Steve	Name of Person	Area Code Daytime Telephone Number
Enclosed is \$125.00 Fil	a check for the following amount: ing Fee \$\frac{\$130.00}{Certificate of Status}\$	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:		
	WTRY & CONSTRUCTION LLC. Limited Lability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the prince	cipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
another business entity with an active Florida regi The name and the Florida street address of the regi Steven T. I. 4555 Low	its own Registered Agent. You must designate an individual or distration.) Gistered agent are: Henres Say Name	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRE)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	thorized to manage and control the Limited Liability Company: Name and Address:	
"MGR" = Manager	Steven T. Hennessey 4555 Lawinia Ct. 1 Talla, Fl. 32311	
•	SEGRETAN 3	
	AM 9: 17	
(Use attachment if necessary)		
ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be spithe date of filing.)	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days afte	
ARTICLE VI: Other provisions, if any.		
REQUIRED SIGNATURE:	& Henrister	
Signature of a me (In accordance with section	ember or an authorized representative of a member. 605.0203 (1) (b). Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true.	
I am aware that any false in	formation submitted in a document to the Department of State clony as provided for in s.817.155, F.S.)	

Filing Fees:
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)